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CONFIRMATION NO. 1669

SERIAL NUMBER 10/673,007	FILING OR 371(c) DATE 09/26/2003 RULE	CLASS 435	GROUP ART UNIT 1649	ATTORNEY DOCKET NO.
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 08/861,990 05/22/1997 PAT 6,696,259  
 which is a CIP of 08/747,842 11/13/1996 ABN  
 which claims benefit of 60/006,619 11/13/1995  
 and claims benefit of 60/015,767 04/16/1996  
 and claims benefit of 60/021,965 06/27/1996  
 and claims benefit of 60/020,638 06/27/1996  
 and claims benefit of 60/020,639 06/27/1996

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***  
**12/05/2003**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 38	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 15
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

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**TITLE**

Glial cell line-derived neurotrophic factor receptors

<b>FILING FEE RECEIVED</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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